

10/696, 806

Application or Docket Number

## PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2003

~~552-1101262~~

## CLAIMS AS FILED - PART I

(Column 1) (Column 2)

TOTAL CLAIMS	<u>20</u>	
FOR	NUMBER FILED	NUMBER EXTRA
TOTAL CHARGEABLE CLAIMS	<u>2</u> minus 20 =	* /
INDEPENDENT CLAIMS	<u>2</u> minus 3 =	* /
MULTIPLE DEPENDENT CLAIM PRESENT	<input type="checkbox"/>	

\* If the difference in column 1 is less than zero, enter "0" in column 2

SMALL ENTITY  
TYPE OTHER THAN  
OR SMALL ENTITY

RATE	FEES	RATE	FEES
BASIC FEE	385.00	OR BASIC FEE	770.00
X\$ 9=		OR X\$18=	
X43=		OR X86=	
+145=		OR +290=	
TOTAL		OR TOTAL	<u>770</u>

## 11/1/04 CLAIMS AS AMENDED - PART II

(Column 1) (Column 2) (Column 3)

AMENDMENT A	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	OTHER THAN	
					RATE	ADDI- TIONAL FEE
Total	* <u>37</u>	Minus	** <u>20</u>	= <u>17</u>	X\$ 9=	
Independent	* <u>4</u>	Minus	*** <u>3</u>	= <u>1</u>	X43=	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM	<input type="checkbox"/>					

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SMALL ENTITY OR OTHER THAN  
OR SMALL ENTITY

RATE	ADDI- TIONAL FEE	RATE	ADDI- TIONAL FEE
X\$ 9=		OR X\$18=	<u>304</u>
X43=		OR X86=	<u>88</u>
+145=		OR +290=	<u>394</u>
TOTAL ADDIT. FEE		OR TOTAL ADDIT. FEE	

4/20/07 (Column 1) (Column 2) (Column 3)

AMENDMENT B	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	OTHER THAN	
					RATE	ADDI- TIONAL FEE
Total	* <u>37</u>	Minus	** <u>37</u>	= <u>0</u>	X\$ 9=	
Independent	* <u>4</u>	Minus	*** <u>4</u>	= <u>0</u>	X43=	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM	<input type="checkbox"/>					

RATE	ADDI- TIONAL FEE	RATE	ADDI- TIONAL FEE
X\$ 9=		OR X\$18=	
X43=		OR X86=	
+145=		OR +290=	
TOTAL ADDIT. FEE		OR TOTAL ADDIT. FEE	

(Column 1) (Column 2) (Column 3)

AMENDMENT C	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	OTHER THAN	
					RATE	ADDI- TIONAL FEE
Total	* <u></u>	Minus	** <u></u>	= <u></u>	X\$ 9=	
Independent	* <u></u>	Minus	*** <u></u>	= <u></u>	X43=	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM	<input type="checkbox"/>					

RATE	ADDI- TIONAL FEE	RATE	ADDI- TIONAL FEE
X\$ 9=		OR X\$18=	
X43=		OR X86=	
+145=		OR +290=	
TOTAL ADDIT. FEE		OR TOTAL ADDIT. FEE	

\* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.

\*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."

\*\*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.